

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
McCain Well 2		NW	NW	34	16 N.	29 E.W.M.	1529030681008	AAS230
McCain Well 1		NW	NW	34	16 N.	29 E.W.M.	1529030680289	Well log attached

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
McCain Well 2 (existing)		NW	NW	34	16 N.	29 E.W.M.	1529030681008	AAS230
McCain Well 1 (existing)		NW	NW	34	16 N.	29 E.W.M.	1529030680289	Well log attached
Proposed Well 3 (proposed)			SW	33	16 N.	29 EWM		
Proposed Well 4 (proposed)		N½	N½	33	16 N.	29 EWM		
Othello City Well #2 (existing)			NW	3	15 N	29 EWM	1529030502001	AFL224
Othello City Well #3 (existing)		SE	SE	34	16 N	29 EWM	1529030680212	ABS088
Othello City Well #4 (existing)		NE	SE	3	15 N	29 EWM	1529030680208	AEL069
Othello City Well #5 (existing)		SE	SW	3	15 N	29 EWM	1529030680297	AFL223
Othello City Well #6 (existing)		NE	NE	4	15 N	29 EWM	1529030502509	ABR235
Othello City Well #7 (existing)		SE	SE	9	15 N	29 EWM	1529031042163	AAP562
Othello City Well #8 (existing)		SW	SW	26	16 N	29 EWM	2100450692350	AAS228
Othello City Well #9 (proposed)		SE	SW	36	16 N	29 EWM	2100450781014	
Othello City Well #10 (proposed)			NW	27	16 N	29 EWM		

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: ☒ YES ☐ NO PROPOSED: ☐ YES ☒ NO – IF NO, PROVIDE OWNER(S) NAME: City of Othello

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation and manufacturing	2500	2960	continuous

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
Generally located within portions of Sections 28, 32 and 33 and in the NW¼NW¼ of Section 34; all located in T. 16 N., R. 29 E.W.M.							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
			16 N.	29 E.W.M.	Adams		
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO							
IF NO, PROVIDE OWNER(S) NAME: _____							

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
Generally located within portions of Sections 28, 32 and 33 and in the N½SW¼NW¼ and the NW¼NW¼ of Section 34; all located in T. 16 N., R. 29 E.W.M.							

1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
			16	29	Adams		

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? ☒ YES ☐ NO

IF NO, PROVIDE OWNER(S) NAME: _____

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?

☒ ES ☐ NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): Water Right No. 4671-A.

6. Remarks and Other Relevant Information:

McCain Foods proposes to add two new wells located within McCain owned property, add existing City of Othello wells, and correct the place of use under this change application.

Note: Although named differently in water right files in the past, McCain refers to Well 2 as the old well, which is authorized both under Certificate 4671-A and G3-00246C. Well 1 is the name associated with newest well, which is authorized under G3-00246C by virtue of a showing of compliance filed in 2003 (see attached).

IF FOR SEASONAL OR TEMPORARY, START DATE ____/____/____ END DATE ____/____/____

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request. For further information, contact: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477. Phone (360) 570-3265.

7. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I hereby grant staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in preparing this above application, I understand that all responsibility for the accuracy of the information rests with me.

<u>JEREMY HOPKINS ENGINEERING</u> Applicant Printed Name – Title	<u>[Signature]</u> Applicant Signature	<u>7/11/13</u> (Date)
<u>JEREMY Hopkins</u> Water Right Holder Printed Name	<u>[Signature]</u> Water Right Holder Signature	<u>7/11/17</u> (Date)
<u>JEREMY Hopkins</u> Land Owner of Existing Place of Use Printed Name	<u>[Signature]</u> Land Owner of Existing Place of Use Signature	<u>7/11/13</u> (Date)
<u>JEREMY Hopkins</u> Land Owner of Proposed Place of Use Printed Name	<u>[Signature]</u> Land Owner of Proposed Place of Use Signature	<u>7/11/13</u> (Date)

Please check the region in which the project is located:

*Submit your application to: DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611	<input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	<input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1295 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 – 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

☐ APPLICATION FEE NOT ENCLOSED ☐ MAP NOT INCLUDED or INCOMPLETE

☐ ADDITIONAL SIGNATURES REQUIRED ☐ SECTION _____ IS INCOMPLETE

☐ OTHER/EXPLANATION: _____

STAFF: _____ DATE: ____/____/____